

ATLANTA POLICE DEPARTMENT

Confidential Source History Sheet

CONFIDENTIAL
L

CS # _____

Code Name or # _____

Name _____ Signatur
e _____

Alias : _____ Signatur
e _____

Telephone # : _____ DOB: _____ Age _____

Address: _____

Race: _____ Sex: ☐ Male ☐ Female Height _____ Weight _____

Eye color: _____ Hair color/
style _____ Marital
Status _____

SSN: _____ Driver's License

Identifying scars, marks or
tattoos: _____

Emergency Contact
Person: _____ Phone # _____

Address: _____

Other
Information: _____

Occupation _____ Employ
er _____

Addres
s _____ Phon
e _____

Income _____ Associates _____

Idiosyncrasies _____
An individualizing characteristic or quality

Languages
Spoken _____

Attitude toward law
enforcement _____

Places
Frequented _____

Past or present gang
affiliation _____

Attached: ☐ Fingerprint ☐ Current
photograph ☐ Current criminal
history ☐ Open criminal
case

Controlling
Officer:

_____	_____	_____
Please Print Name	APD ID #	Assignment
_____		_____
Signature		Date

Supervisor:

_____	_____	_____
Please Print Name	Signature	Date

Section
Commander:

_____	_____	_____
Please Print Name	Signature	Date

☐ Approved

☐ Disapproved

SES Commander

_____	_____	_____
Please Print Name	Signature	Date